PTO/SB/17 (10-08)
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Fees pursuant to the Co	Complete if Known							
				Application N	umber	10/58	4,876	
FEETI	KANSI	VII I I	AL	Filing Date		06/29/	/2006	
For FY 2009				First Named	inventor i	BONNET, A.		
	Examiner Name PAUL, Jessica Mai			ie				
Applicant claims small entity status. See 37 CFR 1.27				Art Unit 1796				
TOTAL AMOUNT	OF PAYMENT	{\$ }	\$130.00	Attorney Doc	ket No.	FR-A	M2003NP	
METHOD OF DAVMENT (short effect out)								
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify):								
Deposit Account Deposit Account Number: 01-2717 Deposit Account Name:								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee(s) indicated below								
Charge any additional fee(s) or any underpayments of Credit any overpayments								
fee(s) under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card								
information and authorization on PTO-2038.								
FEE CALCULATION	DN							
1. BASIC FILING, S	SEARCH, AND EX	CAMINATION	N FEES					
							NATION FEES	
Application Type	Fee (\$)	Small Entity Fee (\$)	Fe <u>e (</u> \$)	<u>Small Entity</u> Fee (\$)		ee (\$)	Small Entity Fee (\$)	Fees Paid(\$)
Utility	330	165	540	270		220	110	rees Falu(s)
Design	220	110	100	50		140	70	
,	220	110	330	165		170	70 85	
Plant	330	165	540	270				
Reissue				-	,	350	325	
Provisional	220	110	0	0		0	0	
2. EXCESS CLAIM FEES Small Entity								
Fee (\$)								<u>Fee (\$)</u>
Each claim over 20 (including Reissues) 52								26
								110
Multiple dependent o	iaims						390	195
Total Claims	Extra Claim	s <u>Fee (\$</u>	1	Fee Paid (\$)			Fee (\$)	<u>Dependent Claims</u> Fee Paid (\$)
20 or			_	\$0.00 _			, c <u>g. 141</u>	recraim (#)
- 20 or HP =x\$52.00 =\$0.00 HP = highest number of total claims paid for, if greater than 20.								
Indep. Claims	Extra Claim	s Fee (\$	1	Fee Paid (\$)				
3 or I			<u> </u>	\$0.00	-			
HP = highest number of independent claims paid for, if greater than 3.								
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under								
37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof.								
See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
<u>Total Sheets</u> <u>Extra Sheets</u> <u>Number of each additional 50 or fraction (hereof</u> <u>Fee (\$)</u> <u>Fee Paid (\$)</u> =								
4. OTHER FEE(S)								
Non-English specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): one month Extension of Time \$130.00								
SUBMITTED BY A O								
Signature	-d 011	777	R	egistration No.	42,1	10	Telephone	215-419-7314
Oignatute	12 014	\mathcal{M}_{-}	(A	ttorney/Agent)	44,1		Leighinnie	213-417-7314

Name (Print/Type) Thomas F. Roland Date June 17, 2010 This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.